

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Citizens for Arlen Specter

A. Full Name (Last, First, Middle Initial) Evelyn Volpe	Transaction ID: D235782 Date of Disbursement
Mailing Address 34 Denyelle Drive	<div> <div>12</div> <div>18</div> <div>2009</div> </div>
City Rocky Hill State CT Zip Code 06067	Amount of Each Disbursement this Period
Purpose of Disbursement Refund	<div>2300.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Valerie Volpe	Transaction ID: D235322 Date of Disbursement
Mailing Address 3105 Legation St NW	<div> <div>12</div> <div>16</div> <div>2009</div> </div>
City Washington State DC Zip Code 20015-1347	Amount of Each Disbursement this Period
Purpose of Disbursement Refund	<div>250.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Valerie Volpe	Transaction ID: D235323 Date of Disbursement
Mailing Address 3105 Legation St NW	<div> <div>12</div> <div>16</div> <div>2009</div> </div>
City Washington State DC Zip Code 20015-1347	Amount of Each Disbursement this Period
Purpose of Disbursement Refund	<div>250.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>2800.00</div>
TOTAL This Period (last page this line number only)	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

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